



**CITY OF  
MAPLE GROVE**

12800 Arbor Lakes Parkway, PO Box 1180, Maple Grove, MN 55311-6180 Phone 763-494-6090 Fax 763-494-6421

Fire Permit  
Application

**Tents, Canopies and Other Membrane Structures**  
**All items must be filled out completely or this application will be returned!**

<b>Site Location</b>	Street Address _____
<b>Organization/ Company or Person</b>	Organization/Company _____ Phone _____ Contact Name _____ Fax _____ Address _____ City _____ State ____ Zip _____

<b>Company providing the tent, canopies or other membrane structure</b>	Company _____ Phone _____ Contact Name _____ Fax _____ Address _____ City _____ State ____ Zip _____
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<b>Date and Time of event</b>	Starting Time: _____ Date: _____ (AM/PM) Finishing Time: _____ Date: _____ (AM/PM)
<b>Date and Time of Installation</b>	Starting Time: _____ Date: _____ (AM/PM) Finishing Time: _____ Date: _____ (AM/PM)
<b>General information</b>	Contact Name _____ Phone _____ Number of people attending _____ Type of Event _____

I hereby apply for this permit and I acknowledge that the information above is complete and accurate; that the work will be in conformance with the ordinances and codes of the City of Maple Grove and with the Minnesota Building/Fire Codes; that I understand this is not a permit but only an application for a permit and work is not to start without a permit; that the work will be in accordance with the approved plan in the case of work which requires a review and approval of plans. 20% of the permit fee is non-refundable with any request for cancellation after a permit has been issued.

Applicant's Signature: \_\_\_\_\_ Approved By: \_\_\_\_\_ Date Approved: \_\_\_\_\_

Planning & Zoning Approval: \_\_\_\_\_

**The following information must be included with the application:**

Tents, Canopies & Other Membrane Structures shall be installed and maintained in accordance with the Minnesota State Fire Code.

1. Plans shall be to scale or shall indicate all measurements.
2. Submit two (2) sets of plans and specifications.
  - A. Provide a detailed site and floor plan indicating:
    1. The location of the tent, canopy & membrane structure in relation to property lines, buildings, vehicle parking or other internal combustion engines, and other tents, canopies and membrane structures.
    2. The size of the tent, canopy or membrane structure.
    3. The location of vehicle parking.
    4. The location of emergency vehicle access.
    5. The location, width, and type of exits.
    6. The location and type of No Smoking signs, exit signs, emergency egress illumination.
    7. A floor plan must also include aisles, seating arrangements, stage, storage plan, any heating/cooling appliances, and fire extinguishers.
    8. Cooking tent area if applicable; including appliance placement, fuel type and storage and a copy of a Permit from Hennepin County Health Department.
    9. The location any open flame or other devices emitting flame, fire or heat or any flammable or combustible liquids, gas and charcoal.
  - B. The sidewalls, drops and tops of all tents, canopies and temporary membrane structures shall be of flame-retardant material or shall be made fire retardant in an approved manner. A label must be permanently attached bearing the identification of size and fabric or material type to each panel.
  - C. An affidavit or affirmation must be submitted with the permit application indicating following:
    1. The names and address of the owners of the tent, canopy or other membrane structure.
    2. The date the fabric was last treated with flame-retardant solution.
    3. The trade name or kind of chemical used in treatment.
    4. The name of person or firm treating the material.
    5. The name of testing agency and test standard by which the fabric was tested.
  - D. Tents, air supported, air-inflated or tensioned membrane structures and their appurtenances shall be adequately roped, braced and anchored to withstand the elements of weather and prevent collapsing. Documentation of structural stability shall be furnished to the chief upon request.
  - E. Air-supported and air-inflated structures have additional requirements; the information will be provided when requested.



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763-494-6090

## **Fire – Rescue Department**

**FIRE DEPARTMENT**  
763-494-6300

**FIRE INSPECTIONS**  
763-494-6090

**Use this sheet for credit card information only.**  
**This will be destroyed after the permit has been processed.**

Under Minnesota law the information provided on this application is considered public and is available to anyone, except for the following:

The information regarding your credit card is private and will be provided only to yourself and to those people who need to know it in order to process your payment. This includes city employees who process your payment and employees of applicable financial institutions. You are not required to provide your credit card information if you want to pay by another method. However, if you choose to pay by credit card you must provide your credit card information to pay the appropriate fee. Otherwise, your application will not be processed.

<p><b>TO PAY BY CREDIT CARD</b></p> <p><b><u>VISA, DISCOVER, AMERICAN EXPRESS OR MASTERCARD</u></b></p>	<p>Name as it appears on credit card: _____</p> <p>Type of credit card: <input type="radio"/> VISA <input type="radio"/> MASTERCARD <input type="radio"/> AMERICAN EXPRESS <input type="radio"/> DISCOVER</p> <p>Expiration Date: ____/____/____ 3 Digit code on back of card: _____</p> <p>Account Number: _____</p> <p>Signature: _____ Date: _____</p>
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